

RECREATION CARD APPLICATION & AGREEMENT

Lakeside Improvement Association
 P.O. Box 42155
 Houston, TX 77242-2155
 713-977-2812; www.lakeside-improvement.org

Date: _____

Name: _____

Street Address: _____

Home Phone #: _____

Alternate Phone #: _____

E-mail: _____

Person to Notify in Case of Emergency

Name: _____

Address: _____

Home Phone: _____

Work Phone: _____

Cell Phone: _____

Relationship: _____

There is a one-time \$50 deposit for the magnetic access card, \$25 of which is refundable should you move or no longer wish to use the recreation facilities. For Park only access, the card deposit is \$25, and is fully refundable. Please send the check and signed form to Lakeside Improvement Association at the address shown above, or place in the LIA Drop Box on the clubhouse porch at 2000 Lakeside Estates Drive.

Note: Your Maintenance Assessment account must be current. Lost card replacement fee: \$25

Waiver & Release of All Claims

I, the undersigned applicant, for myself, my family and my guests, in consideration of rights afforded by membership in the recreational facility of Lakeside Improvement Association, and the use of the Lakeside swimming pool, tennis courts, clubhouse, park and surrounding land at 2000 Lakeside Estates Drive, hereby AGREE TO AND DO HEREBY WAIVE ANY CLAIM FOR DAMAGES BECAUSE OF INJURY OR DEATH that I, my family or my guests might have now or in the future against the Lakeside Improvement Association, its officers and/or directors and DO HEREBY RELEASE AND AGREE TO INDEMNIFY AND HOLD HARMLESS the Lakeside Improvement Association, its officers and directors from any claim, loss or liability resulting from said injury or death which might result directly or indirectly from the use of the above stated facilities. Either signing this application or using the above referenced facilities constitutes acceptance of the terms of this agreement.

I understand and agree that I am responsible for the conduct and safety of my family and guests. I will be held accountable for any acts of vandalism or misuse of said facilities by my family or guests.

I understand and agree to accept and follow the rules governing the operation of the Lakeside Improvement Association recreational facilities.

Signed: _____

Date: _____

List EVERY family member who will use the facilities; household members age 18 and older must sign below:

NAME	RELATIONSHIP	BIRTH DATE	SIGNATURE (REQUIRED FOR THOSE 18 YEARS+)

For Office use

PROPERTY NO.

MAGNETIC CARD NO.